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	(JUN 2 9 20	12074 JOHN	Fee(s) Transmittal. The papers. Each addition have its own certificat Ce I hereby certify that the States Postal Service addressed to the Main service addressed to the Main service acceptance of the Main service addressed to the Main service and service addressed to the Main service and	nis certificate cannot be used al paper, such as an assignm e of mailing or transmission. rtificate of Mailing or Tran his Fee(s) Transmittal is bein with sufficient postage for fill Stop ISSUE FEE address PTO (571) 273-2885, on the	smission g deposited with the United stst class mail in an envelope s above, or being facsimile
APPLICATION NO.	FILING DATE	FIRST NAMED		D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/783,992 TITLE OF INVENTION: B	02/20/2004 AR CONNECTING CLAM	P	Giorgio	Petratto	ST-10	4371
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700		\$300	\$1000	07/05/2006
EXAMINER		ART UNIT		CLASS-SUBCLASS 07,	03/2006 TBESHAH2 000	00095 10783992
FERGUSON, MICHAEL P		3679			FC:2501	709.00 OP
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE Petratto S.r.l. 2. For printing on the patent front page 15 to 1504 (1) the names of up to 3 registered patent attorneys or agents or agent or age						
Please check the appropriate assignee category or categories (will not be 4a. The following fee(s) are enclosed: Sissue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies			4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).			
a. Applicant claims SI	(from status indicated above MALL ENTITY status. See status is requested to apply the Issuablication Fee (if required) with the Laited States Pate of the Laited States Pate	37 CFR 1.27.	on Fee (if an	ant is no longer claiming SMAl y) or to re-apply any previousl other than the applicant; a regi	LL ENTITY status. See 37 C y paid issue fee to the applica stered attorney or agent; or the	FR 1.27(g)(2). ation identified above. the assignee or other party in
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